


|                             |                         |                             |  |                              |
|-----------------------------|-------------------------|-----------------------------|--|------------------------------|
| SERIAL NUMBER<br>09/264,267 | FILING DATE<br>03/08/99 | CLASS<br><del>206</del> 211 | GROUP ART UNIT<br><del>3728</del> 3634 | ATTORNEY DOCKET NO.<br>27070 |
|-----------------------------|-------------------------|-----------------------------|--|------------------------------|

APPLICANT

CLARK A. LEVSEN, SHAWNEE, KS.

\*\*CONTINUING DOMESTIC DATA\*\*\*\*\*

VERIFIED

NONE 


\*\*371 (NAT'L STAGE) DATA\*\*\*\*\*

VERIFIED


NONE 

\*\*FOREIGN APPLICATIONS\*\*\*\*\*

VERIFIED

NONE 

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 03/24/99 \*\* SMALL ENTITY \*\*

|  |   |                        |                     |                       |                           |
|--|---|------------------------|---------------------|-----------------------|---------------------------|
| Foreign Priority claimed<br>35 USC 119 (a-d) conditions met  | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY<br>KS | SHEETS DRAWING<br>2 | TOTAL CLAIMS<br>20 17 | INDEPENDENT CLAIMS<br>1 2 |
| Verified and Acknowledged  <u>Examiner's Initials</u> <u>Initials</u> |   |                        |                     |                       |                           |

ADDRESS

HOVEY WILLIAMS TIMMONS & COLLINS  
2405 GRAND  
SUITE 400  
KANSAS CITY MO 64108

TITLE

KNIFE HOLDER

|                                  |   |   |
|----------------------------------|---|---|
| FILING FEE RECEIVED<br><br>\$825 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>NO. _____ for the following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit _____ |
|----------------------------------|---|---|